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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Anthony First name T Middle name Manuel Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.	Anthony T Manuel, Sr.	
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2901	

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Case number (if known)

Debtor 1 Anthony T Manuel

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs. Business name(s)			
		Business name(s)				
		EINs	EINs			
j.	Where you live		If Debtor 2 lives at a different address:			
		625 N. Lorel Ave Apt# 2 Chicago, IL 60644				
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
Cook County			County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
i. Why you are choosing this district to file for		Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Case number (if known) Debtor 1 Anthony T Manuel

7.	The chapter of the	Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy						
Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box.								
	3		Chapter 7					
		_	Chapter 11					
			Chapter 12					
			Chapter 13					
8.	How you will pay the fee	•	about how you	entire fee when I file my per u may pay. Typically, if you ar attorney is submitting your pa	e paying	the fee yourself,	you may pay with cash	n, cashier's check, or money
			I need to pay	the fee in installments. If yo		e this option, sign	and attach the Applica	ation for Individuals to Pay
			ŭ	e <i>in Installments</i> (Official Form t my fee be waived (You may	,	this option only if	you are filing for Char	oter 7. By law, a judge may
			but is not requapplies to you	uired to, waive your fee, and n r family size and you are unal n to Have the Chapter 7 Filing	nay do so ole to pa	o only if your incor y the fee in install	me is less than 150% of ments). If you choose	of the official poverty line that this option, you must fill out
9.	Have you filed for bankruptcy within the last 8 years?	□ N						
	•			Northern District of IL,				
			District	Eastern Division	When	5/23/14	Case number	14-19469
			District	Northern District of IL, Eastern Division	When	3/29/10	Case number	10-13693
			District	Northern District of IL, Eastern Division	When	4/28/09	Case number	09-15098
10.	Are any bankruptcy	■ N	0					
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ Y						
			Debtor				Relationship to y	/ou
			District		When		Case number, if	known
			Debtor				Relationship to y	/ou
			District		When		Case number, if	known
11.	Do you rent your residence?	□ N	o. Go to lii	ne 12.				
	residence:	■ Y	es. Has you	ur landlord obtained an eviction	n judgm	ent against you ar	nd do you want to stay	in your residence?
				No. Go to line 12.				
				Yes. Fill out <i>Initial Statement</i> bankruptcy petition.	About ar	n Eviction Judgme	ent Against You (Form	101A) and file it with this

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Case 16-34976 Desc Main Document Page 4 of 65 Case number (if known) Debtor 1 Anthony T Manuel Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of **Bankruptcy Code and are** operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes.

Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

Part 4:

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

INO.

Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Debtor 1 Anthony T Manuel

Document Page 5 of 65 Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 65 Case number (if known) Debtor 1 **Anthony T Manuel** Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses □ No are paid that funds will ☐ Yes be available for distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Anthony T Manuel Signature of Debtor 2 Anthony T Manuel Signature of Debtor 1 Executed on November 1, 2016 Executed on MM / DD / YYYY MM / DD / YYYY

Debtor 1 Anthony T Manuel Document Page 7 of 65 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Kevin F	Rouse ARDC	Date	November 1, 2016
Signature of	Attorney for Debtor		MM / DD / YYYY
Kevin Rou	se ARDC		
Printed name			
Ledford, V	Vu & Borges, LLC		
Firm name	<u> </u>		
105 W. Ma	dison		
23rd Floor			
Chicago, I	L 60602		
	City, State & ZIP Code		
Contact phone	312-853-0200	Email address	notice@billbusters.com
#6284394			
Par number 9 C	toto		

		Docum	ent Page 8 of 6	35	
Fill in this informa	ation to identify your	case:			
Debtor 1	Anthony T Manue	el			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bank	kruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					☐ Check if this is an amended filing
					amended ming

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your as	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	2,300.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	2,300.00
Par	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	6,375.10
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	72,085.59
	Your total liabilities	\$	78,460.69
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,784.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,494.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	nedules.
	■ Yes What kind of debt do you have?		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

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8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.

625.00 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total clair	m
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	6,375.10
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	6,375.10

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Filli	in this inform	nation to identify you	r case and this filing:	II Paue IV VI US			
Deb	tor 1	Anthony T Manu	ıel				
Dob	tor O	First Name	Middle Name	Last Name			
	tor 2 use, if filing)	First Name	Middle Name	Last Name			
Unit	ed States Bar	nkruptcy Court for the:	NORTHERN DISTRICT O	F ILLINOIS			
Cas	e number						eck if this is an
						un	ended ming
Off	icial Fo	rm 106A/B					
		e A/B: Pro	perty				12/15
In each	ch category, se it fits best. Be	eparately list and descri as complete and accur space is needed, attac	be items. List an asset only on rate as possible. If two married	ce. If an asset fits in more than on people are filing together, both are. On the top of any additional page:	e equally responsible	for supplying o	ory where you
Part	1: Describe E	Each Residence, Buildin	g, Land, or Other Real Estate	ou Own or Have an Interest In			
1. Do	you own or h	ave any legal or equitab	le interest in any residence, bu	uilding, land, or similar property?			
_	No. Go to Part	2					
_	Yes. Where is						
Part	2: Describe	Your Vehicles					
				cles, whether they are registered of: Executory Contracts and Un		any vehicles y	ou own that
3. C a	ars, vans, tru	ıcks, tractors, sport ı	ıtility vehicles, motorcycles	;			
	No						
	Yes						
	•			I vehicles, other vehicles, and els, snowmobiles, motorcycle acc			
	No						
	Yes						
		•	-	ries from Part 2, including any			\$0.00
Part	2: Doscribo V	our Personal and Hou	sohold Itams				
			table interest in any of the	following items?		portion y Do not de	value of the vou own? educt secured exemptions.
E			e, linens, china, kitchenware				
_	• 165. DESCII						
		B4:			• .		

Misc used household goods and furnishings, including: Sofa, Loveseat, Entertainment Ctr, Center, Television, VCR, Dining Table/Chairs, Refrigerator/Freezer, Stove, Microwave, Pots/Pans, Dishes/Flatware, Vacuum, Bedroom Sets, Lamps, Telephone.

\$800.00

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Debtor 1	Anthony T Mani	uel		Case number (if kn	own)
□ No	es: Televisions and ra	adios; audio, video, nes, cameras, med		oment; computers, printers, scanners; mu	usic collections; electronic devices
_		elevision, DVD P none.	ayer, Computer, Pri	nter, Tablet, Stereo, and Cell	\$500.00
Example No		rines; paintings, prir memorabilia, collec		oks, pictures, or other art objects; stamp,	coin, or baseball card collections;
Example No	ent for sports and hes: Sports, photograp musical instrumed Describe	hic, exercise, and c	ther hobby equipment;	bicycles, pool tables, golf clubs, skis; car	noes and kayaks; carpentry tools;
■ No		otguns, ammunition	, and related equipmen	t	
□ No		s, furs, leather coats	s, designer wear, shoes	accessories	
	Ne	ecessary Wearin	g Apparel		\$600.00
□ No	oles: Everyday jewelr	y, costume jewelry,	engagement rings, wed	ding rings, heirloom jewelry, watches, ge	ms, gold, silver
		rist water			Ψ200.00
■ No	rm animals oles: Dogs, cats, birds Describe	s, horses			
■ No	her personal and ho		ı did not already list, iı	ncluding any health aids you did not li	st
			om Part 3, including a	ny entries for pages you have attached	\$2,100.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

Official Form 106A/B Schedule A/B: Property page 2

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Case number (if known) Document Debtor 1 **Anthony T Manuel** 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition \$100.00 Cash 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... **PNC Bank** \$100.00 Checking 17.1. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ Yes. List each account separately. Institution name: Type of account: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them...

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Dob	otor 1	Case 16-34976	Doc 1	Filed 11/01/16 Document	Entered 1 Page 13 of	1/01/16 16:26:02 65 Case number (if known)	Desc Main
Den	NOI I	Anthony T Manuel				Case number (ii known)	
	<i>Examp</i> ■ No	es, franchises, and other ples: Building permits, excl	usive licenses		n holdings, liquor li	icenses, professional licens	es
Mor	nev or i	property owed to you?					Current value of the
	, ,	,,,					portion you own? Do not deduct secured claims or exemptions.
	No	unds owed to you Give specific information a	bout them, inc	cluding whether you alre	ady filed the returr	ns and the tax years	
	<i>Examp</i> ■ No	support oles: Past due or lump sum Give specific information		usal support, child suppo	ort, maintenance, o	divorce settlement, property	settlement
	<i>Examp</i> ■ No	amounts someone owes bles: Unpaid wages, disabi benefits; unpaid loans Give specific information.	ity insurance s you made to		efits, sick pay, vac	ation pay, workers' compe	nsation, Social Security
		ts in insurance policies oles: Health, disability, or li	e insurance; h	nealth savings account (HSA); credit, home	eowner's, or renter's insura	nce
	Yes. I	Name the insurance comp Con	any of each pany name:	olicy and list its value.	Bene	ficiary:	Surrender or refund value:
				rance Policy through Cash Surrender Val		nony Manuel	\$0.00
	If you a someo No	erest in property that is are the beneficiary of a livine has died. Give specific information.	ng trust, exped			are currently entitled to rec	eive property because
	<i>Examp</i> ■ No	against third parties, wholes: Accidents, employme	nt disputes, in			and for payment	
		Describe each claim					
	No	contingent and unliquida Describe each claim		every nature, including	g counterclaims	of the debtor and rights to	set off claims
35		ancial assets you did no					
		Give specific information.					
36.		he dollar value of all of y art 4. Write that number h					\$200.00
Part	5: Des	scribe Any Business-Relate	d Property You	Own or Have an Interest I	In. List any real esta	ate in Part 1.	

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Case number (if known) Document Debtor 1 **Anthony T Manuel** 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$0.00 56. Part 2: Total vehicles, line 5 \$0.00 57. Part 3: Total personal and household items, line 15 \$2,100.00 Part 4: Total financial assets, line 36 \$200.00 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00

\$2,300.00

63. **Total of all property on Schedule A/B**. Add line 55 + line 62

Total personal property. Add lines 56 through 61...

\$2,300.00

\$2,300.00

Copy personal property total

			111 FAUE 13 01 0:	1.1
Fill in this infor	rmation to identify your	case:		
Debtor 1	Anthony T Manue	el		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this amended filir

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	the Pro	perty You	Claim as	Exempt
---------	----------	---------	-----------	----------	--------

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
	Copy the value from Check only one box for each exemption. Schedule A/B			
Misc used household goods and furnishings, including: Sofa, Loveseat, Entertainment Ctr, Center, Television, VCR, Dining Table/Chairs, Refrigerator/Freezer, Stove, Microwave, Pots/Pans, Dishes/Flatware, Vacuum, Bedroom Sets, Lamps, Telephone. Line from Schedule A/B: 6.1	\$800.00		\$800.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Television, DVD Player, Computer, Printer, Tablet, Stereo, and Cell Phone. Line from Schedule A/B: 7.1	\$500.00		\$500.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Necessary Wearing Apparel Line from Schedule A/B: 11.1	\$600.00	■	\$600.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a)
Wrist Watch Line from Schedule A/B: 12.1	\$200.00		\$200.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)

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Case number (if known)

00	Antilony i manuel					
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	Specific laws that allow exemption		
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
	Cash Line from Schedule A/B: 16.1	\$100.00		\$100.00	735 ILCS 5/12-1001(b)	
	Ellie Hotti Schedule AVB. 10.1			100% of fair market value, up to any applicable statutory limit		
	Checking: PNC Bank Line from Schedule A/B: 17.1	\$100.00		\$100.00	735 ILCS 5/12-1001(b)	
	Ente from Genedale AVB. TTT			100% of fair market value, up to any applicable statutory limit		
	Term Life Insurance Policy through Employer - No Cash Surrender Value	\$0.00		\$0.00	215 ILCS 5/238	
	Beneficiary: Anthony Manuel Line from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit		
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every ■ No			led on or after the date of adjustme	nt.)	
	Yes. Did you acquire the property cover	ed by the exemption w	ithin 1	,215 days before you filed this case	?	
	□ No					
	☐ Yes					

		13(3)31111		
Fill in this infor	mation to identify your	case:		
Debtor 1	Anthony T Manue	el		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

		Document	Page 18 of	65	-		
Fill in this inform	mation to identify your o						
Debtor 1	Anthony T Manue	1					
200101 1	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Ba	nkruptcy Court for the:	NORTHERN DISTRICT OF I	ILLINOIS				
Case number							
(if known)						Check	if this is an
						amende	ed filing
Official Form	~ 106E/E						
Official Forn		ha Hava Unasaura	d Claima				12/15
		ho Have Unsecured Part 1 for creditors with PRIOR			IDDIODITY		
Schedule G: Execu Schedule D: Credit	tory Contracts and Unexpi ors Who Have Claims Secu tinuation Page to this page	that could result in a claim. Also red Leases (Official Form 106G) ured by Property. If more space i e. If you have no information to i	. Do not include any cre is needed, copy the Par	editors with partially s t you need, fill it out,	secured clair number the	ns that a entries in	re listed in the boxes on the
Part 1: List A	II of Your PRIORITY Un	secured Claims					
1. Do any credito	ors have priority unsecured	d claims against you?					
☐ No. Go to F	Part 2.						
Yes.							
identify what ty possible, list th	pe of claim it is. If a claim ha e claims in alphabetical orde	 If a creditor has more than one p s both priority and nonpriority amour according to the creditor's name. rticular claim, list the other creditors 	unts, list that claim here a If you have more than tw	and show both priority a	and nonpriorit	y amount	s. As much as
(For an explana	ation of each type of claim, s	ee the instructions for this form in t	the instruction booklet.)	T. (.) . (.)	B 4 - 2		N
				Total claim	Priority amount		Nonpriority amount
2.1 Illinois	Department of Rever	nue Last 4 digits of acco	ount number	\$76.70	,	\$42.50	\$34.20
,	editor's Name	When we the debt					
Bankru P.O.Bo	ptcy Section	When was the debt	incurred?		-		
	o, IL 60664-0338						
	treet City State Zlp Code	As of the date you f	ile, the claim is: Check a	all that apply			
Who incurre	d the debt? Check one.	☐ Contingent					
■ Debtor 1 o	only	☐ Unliquidated					
Debtor 2 of	only	☐ Disputed					
Debtor 1 a	and Debtor 2 only	Type of PRIORITY u	insecured claim:				
☐ At least or	ne of the debtors and anothe	r Domestic support	obligations				
☐ Check if t	this claim is for a commun	ity debt Taxes and certain	n other debts you owe the	government			
	subject to offset?	<u> </u>	or personal injury while yo	•			
■ No		☐ Other. Specify	-				
☐ Yes			State Income Taxe	S			

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Case number (if know)

Debto	r 1 Anthony T Manuel	Case number (if know)	
2.2	Internal Revenue Serivce Priority Creditor's Name	Last 4 digits of account number \$6,298.40 \$3,40	00.24 \$2,898.16
	P.O. Box 7346	When was the debt incurred?	
	Philadelphia, PA 19101-7346 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
v	Who incurred the debt? Check one.	☐ Contingent	
ı	Debtor 1 only	☐ Unliquidated	
	Debtor 2 only		
_	_	☐ Disputed Type of PRIORITY unsecured claim:	
_	Debtor 1 and Debtor 2 only	Domestic support obligations	
	At least one of the debtors and another	_	
	Check if this claim is for a community debt	Taxes and certain other debts you owe the government	
_	s the claim subject to offset? ■ No	☐ Claims for death or personal injury while you were intoxicated	
	⊒ No ⊒ Yes	☐ Other. Specify Federal Income Taxes	
	1 163	reactal modific raxes	
2.3	Tracey Jackson	Last 4 digits of account number \$0.00	\$0.00 \$0.00
	Priority Creditor's Name 7124 S. Wentworth	When was the debt incurred?	
	Chicago, IL 60626 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
V	Who incurred the debt? Check one.	☐ Contingent	
	Debtor 1 only	☐ Unliquidated	
Г	Debtor 2 only	□ Disputed	
_	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:	
	☐ At least one of the debtors and another	☐ Domestic support obligations	
	☐ Check if this claim is for a community debt	■ Taxes and certain other debts you owe the government	
	s the claim subject to offset?	☐ Claims for death or personal injury while you were intoxicated	
	No	☐ Other. Specify	
	☐ Yes	Child Support	
- · ·	This was a supplied to the		
Part 2			
	any creditors have nonpriority unsecured claim		
Ц	No. You have nothing to report in this part. Submit	this form to the court with your other schedules.	
	Yes.		
un: tha	secured claim, list the creditor separately for each c	e alphabetical order of the creditor who holds each claim. If a creditor has more that laim. For each claim listed, identify what type of claim it is. Do not list claims already incommodities or creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the	cluded in Part 1. If more
ı a			Total claim
4.1	Aaron's Furniture Nonpriority Creditor's Name	Last 4 digits of account number	\$1,567.68
	4428 W. North Ave.	When was the debt incurred?	_
	Chicago, IL 60639 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the dam is. Oneck an that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other, Specify Loan	

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Debtor 1 Anthony T Manuel Case number (if know) 4.2 \$334.00 **Allied Interstate** Last 4 digits of account number Nonpriority Creditor's Name PO Box 103104 When was the debt incurred? Los Angeles, CA 90076 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No Other. Specify SBC ☐ Yes **AMCA/Amer Medical Collection** 7910 \$298.00 4.3 Last 4 digits of account number Agency Nonpriority Creditor's Name 4 Westchester Plaza When was the debt incurred? Suite 110 Elmsford, NY 10523 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Laboratory Corp Of America ☐ Yes 4.4 **Bank of America** \$378.02 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 26078 Greensboro, NC 27420-6012 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Debt Owed

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Debtor 1 Anthony T Manuel Case number (if know) 4.5 \$98.00 **Capital Accounts** Last 4 digits of account number Nonpriority Creditor's Name 1642 Westgate Cir Sute 20 When was the debt incurred? Brentwood, TN 37027 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Garfield Family Denistry ☐ Yes City of Chicago Corporate \$6,422.88 4.6 Counselor Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 121 N. LaSalle Street Suite 600 Chicago, IL 60602 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Fines** Other. Specify 4.7 ComEd \$500.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 3 Lincoln Center Attn: Bkcy Group-Claims Department Oakbrook Terrace, IL 60181 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Utilities

Document Page 22 of 65 Debtor 1 Anthony T Manuel Case number (if know) 4.8 \$304.00 **Direct TV** Last 4 digits of account number Nonpriority Creditor's Name PO Box 78626 When was the debt incurred? Phoenix, AZ 85062 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Utility Bills or Cellular Service ☐ Yes 4.9 Dr. Romano Last 4 digits of account number \$4,340.00 Nonpriority Creditor's Name When was the debt incurred? 3 Erie St Oak Park, IL 60302 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Medical or Dental services** Other. Specify 4.1 **Drive Financial** \$2,767.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 562088 When was the debt incurred? Dallas, TX 75356 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

Other. Specify Vehicle

☐ Debts to pension or profit-sharing plans, and other similar debts

Deficiency - Repossessed or Surrendered

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debt

■ No

☐ Yes

☐ Disputed

☐ Student loans

report as priority claims

■ Other. Specify Medical

Type of NONPRIORITY unsecured claim:

 $oxed{\square}$ Obligations arising out of a separation agreement or divorce that you did not

 \square Debts to pension or profit-sharing plans, and other similar debts

Debtor 1 and Debtor 2 only

Is the claim subject to offset?

☐ At least one of the debtors and another

☐ Check if this claim is for a community

Document Page 24 of 65 Debtor 1 Anthony T Manuel Case number (if know) 4.1 **Hinsdale Orthopaedics** \$0.00 Last 4 digits of account number Nonpriority Creditor's Name **PO BOX 914** When was the debt incurred? La Grange, IL 60525 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Notice Only ☐ Yes 4.1 Illinois Bell Telephone Company \$147.91 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? % AT&T Services, Inc. One AT&T Way, Room 3A104 Bedminster, NJ 07921 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Utility Bills or Cellular Service ☐ Yes 4.1 Illinois Department of Empl Securit \$6,000.00 6 Last 4 digits of account number Nonpriority Creditor's Name **Benefit Payment Control Division** When was the debt incurred? P.O.Box 4385 Chicago, IL 60680 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed

Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No ☐ Yes

Type of NONPRIORITY unsecured claim: ☐ Student loans

 \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify **Overpayment**

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\$984.00	Last 4 digits of account number	JC Christopher & Assoc	4.1 7
	When was the debt incurred?	Nonpriority Creditor's Name P.O.Box 519 Sauk Rapids, MN 56379	
	As of the date you file, the claim is: Check all that apply	Number Street City State Zlp Code Who incurred the debt? Check one.	
	☐ Contingent	Debtor 1 only	
	☐ Unliquidated	☐ Debtor 2 only	
	☐ Disputed	☐ Debtor 1 and Debtor 2 only	
	Type of NONPRIORITY unsecured claim:	☐ At least one of the debtors and another	
	☐ Student loans	☐ Check if this claim is for a community	
	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	debt Is the claim subject to offset?	
	Debts to pension or profit-sharing plans, and other similar debts	No	
	Other. Specify Debt Owed	□Yes	
\$0.00	Last 4 digits of account number	Minnard M Skiles	4.1
	When was the debt incurred?	Nonpriority Creditor's Name C/O Simon & McClosky Ltd. 120 W. Madison, Suite 11100	<u> </u>
	As of the date you file, the claim is: Check all that apply	Chicago, IL 60602 Number Street City State Zlp Code Who incurred the debt? Check one.	
	☐ Contingent	Debtor 1 only	
	☐ Unliquidated	☐ Debtor 2 only	
	☐ Disputed	☐ Debtor 1 and Debtor 2 only	
	Type of NONPRIORITY unsecured claim:	\square At least one of the debtors and another	
	☐ Student loans	☐ Check if this claim is for a community	
	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	debt Is the claim subject to offset?	
	Debts to pension or profit-sharing plans, and other similar debts	■ No	
	Other. Specify Notice Only	Yes	
\$1,012.00	Last 4 digits of account number	NATIONWIDE	4.1
	When was the debt incurred?	Nonpriority Creditor's Name 3435 N CICERO Chicago, IL 60641	
	As of the date you file, the claim is: Check all that apply	Number Street City State Zlp Code Who incurred the debt? Check one.	
	☐ Contingent	Debtor 1 only	
	☐ Unliquidated	Debtor 2 only	
	☐ Disputed	☐ Debtor 1 and Debtor 2 only	
	Type of NONPRIORITY unsecured claim:	\square At least one of the debtors and another	
	Student loans	☐ Check if this claim is for a community	
	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	debt Is the claim subject to offset?	
	☐ Debts to pension or profit-sharing plans, and other similar debts	■ No	
	■ Other. Specify Debt Owed		

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Document Page 26 of 65 Case number (if know) Debtor 1 Anthony T Manuel 4.2 Pekay & Bilstein PC 1460 \$1,580.50 Last 4 digits of account number 0 Nonpriority Creditor's Name 77 W WASHINGTON When was the debt incurred? #400 Chicago, IL 60602 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.2 **Peoples Gas** \$10,189.43 Last 4 digits of account number Nonpriority Creditor's Name 200 E. Randolph Dr. When was the debt incurred? Chicago, IL 60601 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Utility Bills or Cellular Service ☐ Yes 4.2 Portfolio Recovery \$23,001.17 Last 4 digits of account number 2 Nonpriority Creditor's Name Attn: Bankruptcy When was the debt incurred? PO Box 41067 Norfolk, VA 23541 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans

debt

■ No

☐ Yes

■ Other. Specify Debt Owed

report as priority claims

 \square Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

☐ Check if this claim is for a community

Is the claim subject to offset?

Page 27 of 65 Case number (if know) Document Debtor 1 Anthony T Manuel **Professional Account Management** 4.2 \$484.00 3 LLC Last 4 digits of account number Nonpriority Creditor's Name **Collection Services Division** When was the debt incurred? PO Box 391 Milwaukee, WI 53201 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts No ■ Other. Specify TCF Bank ☐ Yes 4.2 Receivable Management \$200.00 Last 4 digits of account number Nonpriority Creditor's Name 3348 Ridge Rd. When was the debt incurred? Lansing, IL 60438 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Fines 4.2 **Ressurection Health** 7080 \$2,169.00 Last 4 digits of account number Nonpriority Creditor's Name 19 Mollison Way When was the debt incurred? Lewiston, ME 04240 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

5

Other. Specify

Debts to pension or profit-sharing plans, and other similar debts

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P.O. Box 8077 London, KY 40742 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify

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4.2	Tele-Collection Systems Inc.	Last 4 digits of account nu	ımher	\$90.00
9	Nonpriority Creditor's Name 4749 Lincoln Mall Drive, Suite 600	When was the debt incurre		Ψσοισσ
	Matteson, IL 60443 Number Street City State Zlp Code	As of the date you file the	claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the	Claim is. Check an that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY un	secured claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of report as priority claims	f a separation agreement or divorce that you did not	
	■ No		t-sharing plans, and other similar debts	
	☐ Yes	·	orial Park District	
4.3	US Bank	Lost 4 digits of appaulating	imbar	\$439.00
0	Nonpriority Creditor's Name	Last 4 digits of account nu		Ψ+03.00
	PO Box 790084 Saint Louis, MO 63179	When was the debt incurre	ed?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the	claim is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY un	secured claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	☐ Obligations arising out of	f a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profi	t-sharing plans, and other similar debts	
	Yes	Other. Specify Debt	Owed	
Part	3: List Others to Be Notified About a De	ebt That You Already Listed		
is ti hav noti	rying to collect from you for a debt you owe to s re more than one creditor for any of the debts th ified for any debts in Parts 1 or 2, do not fill out	someone else, list the original cre lat you listed in Parts 1 or 2, list the or submit this page.	ot that you already listed in Parts 1 or 2. For example, it ditor in Parts 1 or 2, then list the collection agency her he additional creditors here. If you do not have additio	e. Similarly, if you
	e and Address old Scott Harris, P.C.	On which entry in Part 1 or Part 2 Line 4.6 of (Check one):	did you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims	
	W. Jackson Blvd	Line 4.0 of (Crieck one):	■ Part 1: Creditors with Priority Unsecured Claims	
Ste			Part 2: Creditors with Nonpriority Unsecured Clair	ns
Chic	cago, IL 60604	Last 4 digits of account number		
Name	e and Address	On which entry in Part 1 or Part 2	did you list the original creditor?	
	rney Gen Unem Ins Div	Line 4.16 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims	
	s. State St. 992		Part 2: Creditors with Nonpriority Unsecured Clair	ms
Chic	cago, IL 60603	Last 4 digits of account number	• •	
Nama	e and Address	On which entry in Part 1 or Part 2	did you list the original creditor?	
	rney General	Line 4.16 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims	
100	W. Randolph		■ Part 2: Creditors with Nonpriority Unsecured Clair	ms
Chic	cago, IL 60601	Last 4 digits of account number	and the second of the second o	-
NI	and Address	-	did you list the eniginal dis0	
	and Address of Chicago	On which entry in Part 1 or Part 2 Line 4.6 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
-	t of Revenue		Part 2: Creditors with Nonpriority Unsecured Claim	ms
			and a creation and morpholity of locoured Oldin	

Official Form 106 E/F

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Case number (if know) Debtor 1 Anthony T Manuel P.O. Box 88292 Chicago, IL 60680-1292 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? City of Chicago Dept. of Finance Line 4.6 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 6330 ■ Part 2: Creditors with Nonpriority Unsecured Claims Chicago, IL 60680 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Drive Financial Services** Line 4.22 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 8585 N. Stemmons Frwy, Ste. 800-N ■ Part 2: Creditors with Nonpriority Unsecured Claims Dallas, TX 75247 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Garfield Family Denistry** Line 4.5 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 11141 S. Kedzie Part 2: Creditors with Nonpriority Unsecured Claims Chicago, IL 60655 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Illinois Child Support Enforcement Line 2.3 of (Check one): Part 1: Creditors with Priority Unsecured Claims 509 S. 6th St. ☐ Part 2: Creditors with Nonpriority Unsecured Claims Springfield, IL 62701-1825 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Illinois Department of Employment Line 4.16 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims P.O. Box 19286 Springfield, IL 62794 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Laboratory Corp. of America Line **4.3** of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 8015 ■ Part 2: Creditors with Nonpriority Unsecured Claims **Burlington, NC 27216-8015** Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Melvin Kaplan Line 4.20 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 14 E. Jackson Blvd. ■ Part 2: Creditors with Nonpriority Unsecured Claims Chicago, IL 60604 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Memorial Park District** Line 4.29 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims **Department of Police** Part 2: Creditors with Nonpriority Unsecured Claims 3105 W. Washington Blvd. Bellwood, IL 60104 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address National Capital Management, LLC Line 4.22 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 8245 Tournament Drive Ste. 230 Part 2: Creditors with Nonpriority Unsecured Claims Memphis, TN 38125 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Nationwide Line 4.19 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 41908 Part 2: Creditors with Nonpriority Unsecured Claims Chicago, IL 60641 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? SBC Line 4.2 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims **Bankruptcy Department** Part 2: Creditors with Nonpriority Unsecured Claims

Official Form 106 E/F

PO Box 769

Arlington,	TX 7600	4	Last 4 digits of account number				
Name and Ad Secretary Safety & F 2701 S. Di Springfield	of State inancial rksen Pa		On which entry in Part 1 or Part 2 did y Line 4.6 of (Check one): Last 4 digits of account number	☐ Part 1: C	iginal creditor? Creditors with Priority Uns Creditors with Nonpriority		ns
Name and Ad Sprint Cor Attn Bank P.O.Box 79 Overland I	p. ruptcy D 949	ept 66207-0949	On which entry in Part 1 or Part 2 did y Line 4.11 of (Check one):	☐ Part 1: C	iginal creditor? Creditors with Priority Uns Creditors with Nonpriority		ns
Name and Ad State Disb PO Box 54 Carol Stre	dress oursemer	nt Unit	Last 4 digits of account number On which entry in Part 1 or Part 2 did y Line 2.3 of (Check one):	Part 1: C	iginal creditor? Creditors with Priority Uns Creditors with Nonpriority		ns
Name and Ad TCF Bank P.O box 18 Saint Paul	8160	18	Last 4 digits of account number On which entry in Part 1 or Part 2 did y Line 4.23 of (Check one): Last 4 digits of account number	☐ Part 1: C	iginal creditor? Creditors with Priority Unst		ns
Name and Ad Tele-Colle 2 Transam Oakbrook	ction Sy n Plaza D	rive. Suite 3	On which entry in Part 1 or Part 2 did y Line 4.29 of (Check one): Last 4 digits of account number	☐ Part 1: C	iginal creditor? Creditors with Priority Uns Creditors with Nonpriority		ns
Name and Ad US Bank PO Box 52 Cincinnati	229	01	On which entry in Part 1 or Part 2 did y Line 4.30 of (Check one): Last 4 digits of account number	☐ Part 1: C	iginal creditor? Creditors with Priority Uns Creditors with Nonpriority		ns
Name and Ad Village of 3200 Wash Bellwood,	Bellwood hington I	Blvd.	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.24 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number			ns	
Name and Address westsuburban medical center 3 Erie St Oak Park, IL 60302			On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.9 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number			ns	
Part 4: A	dd the An	nounts for Each Type of U	nsecured Claim				
6. Total the ar type of uns			aims. This information is for statistica	al reporting	purposes only. 28 U.S. Total Clain		amounts for each
Total claims from Part 1	6a. 6b. 6c. 6d.			6a. 6b. 6c. 6d.	\$ \$ \$	0.00 6,375.10 0.00 0.00	
	6e.	Total Priority. Add lines 6a th	rough 6d.	6e.	\$	6,375.10	

Student loans

Total Claim

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Debtor 1 Anthony T Manuel

Total claims from Part 2

			 0.00
6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 72,085.59
6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 72,085.59

			111 FAUE 33 ULU3	
Fill in this infor	mation to identify your	case:		
Debtor 1	Anthony T Manue	el		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Abliene Vazque
625 N. Zorel
1st Floor
Chicago, IL 60644

State what the contract or lease is for
Debtor is Lessee on a Residential Apartment Lease:
\$800.00 per month.

		Docume	nt Page 34 c	<u>ıf 65 </u>	
Fill in this i	nformation to identify your	case:			
Debtor 1	Anthony T Manu	al .			
DCDIOI 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing	j) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case numb	er				
(if known)				☐ Check if this is an	
				amended filing	
Official	Form 106H				
		ala4 a wa			
<u>Scneal</u>	ule H: Your Cod	eptors		12/	15
	and case number (if known) ou have any codebtors? (If			as a codebtor.	
_					
■ No					
☐ Yes					
	in the last 8 years, have you , California, Idaho, Louisiana			y? (Community property states and territories include ngton, and Wisconsin.)	
■ No. (Go to line 3.				
_	Did your spouse, former spo	use, or legal equivalent live	with you at the time?		
	Dia year opeaee, remier ope	acc, c. legal equitalent iire	man you at ano anno.		
in line 2 Form 1	2 again as a codebtor only	f that person is a guaran	tor or cosigner. Make	if your spouse is filing with you. List the person sh sure you have listed the creditor on Schedule D (Of 6G). Use Schedule D, Schedule E/F, or Schedule G	fficial
_	column 1: Your codebtor			Column 2: The creditor to whom you owe the d	ebt
Na	ame, Number, Street, City, State and Z	IP Code		Check all schedules that apply:	
3.1				☐ Schedule D, line	
	ame			☐ Schedule E/F, line	
				☐ Schedule G, line	
	hor Ctroot			_	
	umber Street ity	State	ZIP Code		
2.2				Cabadula D. lina	
3.2	ame			Schedule D, line	
14				☐ Schedule E/F, line	
_				☐ Schedule G, line	
	umber Street ity	State	ZIP Code		
C	••;	Sidio	<u>-11</u> 0000		

Schedule H: Your Codebtors

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Eill	in this information to identify your c	380.						
	otor 1 Anthony T N							
_	otor 2 buse, if filing)							
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS					
(If kr	se number nown)					ended filing lement showi	ng postpetition chapter following date:	
_	fficial Form 106l				MM / E	D/ YYYY		
S	chedule I: Your Inc	ome					12/15	
sup spo atta	as complete and accurate as possible plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not filing wi	ng jointly, and your sp ith you, do not include	oouse is livi e informatio	ing with you, on about you	include infor spouse. If m	rmation about your nore space is needed,	
1.	Fill in your employment information.		Debtor 1	Deb	Debtor 2 or non-filing spouse			
	If you have more than one job,	Employment status	■ Employed			☐ Employed		
	attach a separate page with information about additional	Employment status	☐ Not employed		☐ Not employed			
	employers.	Occupation	Dean of Students	3				
	Include part-time, seasonal, or self-employed work.	Employer's name	Chicago Quest H	igh Schoo	ol			
	Occupation may include student or homemaker, if it applies.	Employer's address	1443 N. Ogden A Chicago, IL 6061					
		How long employed t	here? 01 montl	h				
Pai	ct 2: Give Details About Mor	nthly Income						
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to rep	oort for any I	ine, write \$0 ir	the space. Ir	nclude your non-filing	
	ou or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	for all emplo	yers for that p	erson on the	lines below. If you need	
					For Debtor 1		ebtor 2 or ling spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2. \$	3,750.	00 \$	N/A	
3.	Estimate and list monthly overt	ime pay.		3. +\$	0.	00_ +\$	N/A	

3,750.00

N/A

Calculate gross Income. Add line 2 + line 3.

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Deb	tor 1	Anthony T Manuel	-	C	ase	number (if known)				
					For	Debtor 1		Debtor filing s		
	Cop	by line 4 here	4.		\$	3,750.00	\$		N/A	<u>\</u>
5.	List	all payroll deductions:								
-	5a.	Tax, Medicare, and Social Security deductions	5a	a	\$	966.00	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b		$\mathring{\$}^-$	0.00	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	50		\$_	0.00	\$		N/A	
	5d.	Required repayments of retirement fund loans	50	i.	\$_	0.00	\$		N/A	_
	5e.	Insurance	5e	€.	\$_	0.00	\$		N/A	\
	5f.	Domestic support obligations	5f.		\$_	0.00	\$		N/A	_
	5g.	Union dues	5g	,	\$	0.00	\$		N/A	_
	5h.	Other deductions. Specify:	_ 5h	1.+	\$_	0.00	+ \$		N/A	<u>\</u>
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	966.00	\$		N/A	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	2,784.00	\$		N/A	<u>\</u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	ì.	\$	0.00	\$		N/A	
	8b.	Interest and dividends	8b).	\$_	0.00	\$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80) .	\$	0.00	\$		N/A	\
	8d.	Unemployment compensation	80	i.	\$_	0.00	\$		N/A	<u> </u>
	8e.	Social Security	8e	€.	\$	0.00	\$		N/A	\
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$_	0.00	\$		N/A	_
	8g. 8h.	Pension or retirement income Other monthly income. Specify:	8g	,	\$_ \$	0.00	, <u>\$</u> —		N/A N/A	_
	OII.	Other monthly income. Specify.	_ 01	ı.+ —	Ф —	0.00	+ ⊅		IN/A	<u> </u>
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		0.00	\$		N/	Α
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		2,784.00 + \$		N/A	= \$	2,784.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		*-		2,704.00		14/1	+ -	2,704.00
11.	Star Incli othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not acify:	depe			•			e J. +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certain lies						12.	\$	2,784.00
13.	Do	you expect an increase or decrease within the year after you file this form	?					ļ	Combi	ined ly income
		No.								
		Voc Evoluin:								

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Debtor 1 Anthony T Manuel Debtor 2 (Spouse, if filing) United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Official Form 106J Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space in needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Is this a joint case? No. Go to lime 2. You Do not list Debtor 1 and Yes. Fill out this information for bettor 2. Do not list Debtor 1 and Yes. Fill out this information for bettor 1 or Debtor 2. Do not state the dependents names. No yes been dependents names. No yes been dependents? No Yes. No Yes. No Yes. This case in the dependent of the formation for bettor 1 or Debtor 2. The person of date dark the bankrupery is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Front 106L). The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the gound or lot. If not included in line 4: If a Real estate taxes 4a. \$ 0.00 4b. \$ 0.00 Assistance and have included it on Schedule I: Your Income (Official Front 106L). An an mended filing A as an animal fill in the supplication of the form and fill in the supplication of the form and fill in the supplication of the supplication of the form and fill in the supplication of the supplication of the form and fill in the supplication of the supplication of the supplication of the form and fill in the supplication of	Fill	in this information to identify your case:				
Debtor 2 (Spoose, if filling) United States Bankruptey Court for the: MORTHERN DISTRICT OF ILLINOIS Official Form 106J Schedule J: Your Expenses It is state and schedule J: Your Household Is this spint case? No. Go to line 2. Schedule J: Yes. Debtor 2 inve in a separate household? No Do not list Debtor 1 and Pyes. Fill out this information for each dependents each dependent and pour dependents? Do not state the dependents names. Part L: Expenses include expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. In Clude suppnase paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 108J). If not included in line 4: 4a. Real estate taxes 4b. Propertly, homeowner's, or renter's insurance 4c. Horne mainteanner, repair, and upkeep expenses 4c. 9 0.00 4d. Home mainteanner, repair, and upkeep expenses 4c. 9 0.00 4d. Home mainteanner, repair, and upkeep expenses 4c. 9 0.00 4d. Home mainteanner, repair, and upkeep expenses 4c. 9 0.00 4d. Home mainteanner, repair, and upkeep expenses 4d. 9 0.00 4d. Home mainteanner, repair, and upkeep expenses 4d. 9 0.00 4d. Home mainteanner, repair, and upkeep expenses 4d. 9 0.00	Deb	otor 1 Anthony T Manuel		Chec	ck if this is:	
Spouse, if filing 13 expenses as of the following date:	Dah				•	
Case number (If known) Comparison Compa						
Official Form 106J Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information, if more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Ratt Describe Your Household	Unit	ted States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLIN	OIS	-	MM / DD / YYYY	
Official Form 106J Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Income one space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Patt: Describe Your Household 1. Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a separate household? Yes. Does Debtor 2 live in a separate household? Yes. Does Debtor 2 live in a separate household? Do not list Debtor 1 and Yes. Fill out this information for Each dependent. Debtor 1 or Debtor 2 Do not state the dependents names. Debtor 1 or Debtor 2 Dependent's relationship to Dependent's each dependent. Debtor 1 or Debtor 2 Dependent's relationship to Dependent's live with you? Yes No Yes Sill out this information for Debtor 1 or Debtor 2 Dependent's relationship to Dependent's live with you? Page Test: Estimate Your Ongoing Monthly Expenses Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule J. Your income (Official Form 1061.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. S 0.000 4d. Home maintenance, repair, and upkeep expenses 4c. S 0.000	Cas	se number				
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information, if more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Rat Describe Your Household	(If kı	nown)				
Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information, if more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Ratt Describe Your Household Describe Your Household Desc	Of	fficial Form 106J				
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information, if more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 12						12/15
No. Go to line 2. No. No. Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.	Be a	as complete and accurate as possible. If two married people ar ormation. If more space is needed, attach another sheet to this				
No. Go to line 2. Yes. Does Debtor 2 live in a separate household? Yes. Does Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? No Do not list Debtor 1 and Debtor 2. Do not state the dependents names. Do not state the dependents names. Do not state the dependents names. Do your expenses include expenses of people other than yourself and your dependents? No Yes 3. Do your expenses include expenses of people other than yourself and your dependents? Yes No Yes No Yes No Yes No Yes No Yes The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. S 0.00 4b. Property, homeowner's, or renter's insurance 4d. S 0.00 4d. Homeowner's association or condominium dues 4d. S 0.00 4d. Homeowner's association or condominium dues						
Ves. Does Debtor 2 live in a separate household? Ves. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. Do you have dependents? No No No No No No No N	١.					
Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? No Do not list Debtor 1 and Debtor 2. Do not state the dependents names. Dependent Debtor 1 or Debtor 2 Dependent's relationship to Pendent's relationship to Pendent's relationship to Pendent's relationship to Debtor 1 or Debtor 2 Dependent's relationship to Pendent's r						
2. Do you have dependents? No Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent		□ No				
Do not list Debtor 1 and		☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses	s for Separate House	hold of Deb	tor 2.	
Debtor 2. each dependent	2.	Do you have dependents? ■ No				
dependents names. Yes No No Yes Yes No Yes Ye		□ 1C3.				
3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filling date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4a. \$ 0.00 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4c. \$ 0.00 4d. Homeowner's association or condominium dues						— · · · ·
3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 1061.) If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4c. \$ 0.00 4d. Homeowner's association or condominium dues		dependents names.				
3. Do your expenses include expenses of people other than yourself and your dependents? No Yes Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4a. \$ 0.00 4b. Property, homeowner's, or renter's insurance 4c. \$ 0.00 4d. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00 4d. Homeowner's association or condominium dues						
3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I</i> : Your Income (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. \$ 800.00 If not included in line 4: 4a. Real estate taxes 4a. \$ 0.00 4b. Property, homeowner's, or renter's insurance 4b. \$ 0.00 4c. Home maintenance, repair, and upkeep expenses 4c. \$ 0.00 4d. Homeowner's association or condominium dues 4d. \$ 0.00						□ No
3. Do your expenses include expenses of people other than yourself and your dependents? Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filling date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00 0.00 0.00 0.00 0.00						
3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00 1. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00 1. Ono 1. Ono 2. Ono 3. Ono 4d. Homeowner's association or condominium dues						— · · · ·
expenses of people other than yourself and your dependents? Yes Part 2:	3.	Do your expenses include	-			⊔ Yes
Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00 4d. Homeowner's association or condominium dues	0.	expenses of people other than				
the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues Your expenses 4. \$ 800.00	Est exp	timate your expenses as of your bankruptcy filing date unless y penses as of a date after the bankruptcy is filed. If this is a supp				
4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 800.00 4c. Homeowner's association or condominium dues 4d. \$ 0.00 10.00	Incl the	lude expenses paid for with non-cash government assistance is value of such assistance and have included it on Schedule I:	f you know Your Income			
payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4. \$ 0.00 4b. \$ 0.00 4c. \$ 0.00 4d. \$ 0.00	(Off	ficial Form 106l.)			Your exp	enses
4a.Real estate taxes4a. \$4b.Property, homeowner's, or renter's insurance4b. \$4c.Home maintenance, repair, and upkeep expenses4c. \$4d.Homeowner's association or condominium dues4d. \$	4.		nclude first mortgage	e 4. \$		800.00
 4b. Property, homeowner's, or renter's insurance 4b. \$ 0.00 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4d. \$ 0.00 		If not included in line 4:				
4c. Home maintenance, repair, and upkeep expenses 4c. \$ 0.00 4d. Homeowner's association or condominium dues 4d. \$ 0.00		4a. Real estate taxes		4a. \$		0.00
4d. Homeowner's association or condominium dues 4d. \$ 0.00						
	5.		me equity loans			0.00

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tor 1	Anthony T Manuel	Case num	ber (if known)	
Utilitie	s:			
	Electricity, heat, natural gas	6a.	\$	260.00
	Vater, sewer, garbage collection	6b.	\$	0.00
	elephone, cell phone, Internet, satellite, and cable services	6c.	\$	0.00
6d. C	Other. Specify: Cell Phone	6d.	\$	60.00
	nternet		\$	60.00
	nd housekeeping supplies		\$	450.00
	are and children's education costs	8.	·	0.00
	ng, laundry, and dry cleaning	9.		230.00
	al care products and services	10.	·	154.00
	al and dental expenses	11.	·	100.00
	ortation. Include gas, maintenance, bus or train fare.		·	
	include car payments.	12.	\$	300.00
. Enterta	ninment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
. Charita	able contributions and religious donations	14.	\$	80.00
. Insurai				
	include insurance deducted from your pay or included in lines 4 or 20.			
	ife insurance	15a.	·	0.00
	Health insurance	15b.	· -	0.00
	/ehicle insurance	15c.	·	0.00
	Other insurance. Specify:	15d.	\$	0.00
 Taxes. Specify 	Do not include taxes deducted from your pay or included in lines 4 or 20.	16.	\$	0.00
	ment or lease payments:			
	Car payments for Vehicle 1	17a.	·	0.00
	Car payments for Vehicle 2	17b.	·	0.00
	Other. Specify:	17c.	\$	0.00
	Other. Specify:	17d.	\$	0.00
	ayments of alimony, maintenance, and support that you did not report a		ф	0.00
	ed from your pay on line 5, Schedule I, Your Income (Official Form 106I).	. 18.		
•	payments you make to support others who do not live with you.		\$	0.00
Specify		19.		
	real property expenses not included in lines 4 or 5 of this form or on Sch			0.00
	Mortgages on other property	20a.		0.00
	Real estate taxes	20b.	·	0.00
	Property, homeowner's, or renter's insurance	20c.		0.00
	Maintenance, repair, and upkeep expenses	20d.	·	0.00
	Homeowner's association or condominium dues	20e.	·	0.00
. Other:	Specify:	21.	+\$	0.00
. Calcula	ate your monthly expenses			
	dd lines 4 through 21.		\$	2,494.00
	opy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	Id line 22a and 22b. The result is your monthly expenses.		\$	2,494.00
220. AC	id line 22a and 22b. The result is your monthly expenses.		Ψ	2,494.00
	ate your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.	23a.		2,784.00
23b. C	Copy your monthly expenses from line 22c above.	23b.	-\$	2,494.00
	Subtract your monthly expenses from your monthly income.	220	\$	290.00
T	he result is your monthly net income.	23c.	Ψ	250.00
For exar modifica	expect an increase or decrease in your expenses within the year after yample, do you expect to finish paying for your car loan within the year or do you expect you tion to the terms of your mortgage?			e or decrease because o
■ No. □ Yes	Fundada harra			
111/	Explain here:			

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Fill in this infor	mation to identify your	c250:			
Debtor 1					
Debior	Anthony T Manue	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					heck if this is an mended filing
Official Forr					
Declarat	tion About a	ın Individual	Debtor's Sc	hedules	12/15
Sig	n Below				
Did you pa	ny or agree to pay some	one who is NOT an atto	rney to help you fill out ba	ankruptcy forms?	
■ No					
☐ Yes. I	Name of person			Attach Bankruptcy Petitic Declaration, and Signatu	
	alty of perjury, I declare e true and correct.	that I have read the sum	nmary and schedules filed	l with this declaration and	
X /s/ Ant	thony T Manuel		X		
Antho	ny T Manuel ire of Debtor 1		Signature of D	Debtor 2	
Date _I	November 1, 2016		Date		

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Fill in	this inform	ation to identify you	r case:			
Debtor	r 1	Anthony T Manu	iel			
		First Name	Middle Name	Last Name		
Debtor (Spouse		First Name	Middle Name	Last Name		
United	States Ban	kruptcy Court for the:	NORTHERN DISTRICT (OF ILLINOIS		
Omica	Clatoo Barri	auptoy Court for the.				
Case r	number					Check if this is an mended filing
Offic	cial For	m 107				
			Affairs for Indivi	duals Filing for B	ankruptcy	4/10
inform	ation. If mo er (if known)	re space is needed, . Answer every que	attach a separate sheet to	this form. On the top of any	equally responsible for sup y additional pages, write you	
1. W	hat is your	current marital statu	s?			
□	Married Not marri	ed				
2. Dı	uring the las	st 3 years, have you	lived anywhere other than	where you live now?		
	No Yes. List	all of the places you I	ived in the last 3 years. Do no	ot include where you live now	<i>i</i> .	
D	ebtor 1 Pric	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory co, Texas, Washington and W	
■	l No l Yes Mak	e sure vou fill out <i>Sch</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
			(0)	,		
Part 2	Explain	the Sources of You	r Income			
Fil	II in the total	amount of income yo	u received from all jobs and a	ng a business during this yeall businesses, including partetogether, list it only once ur		ndar years?
	l No					
-	Yes. Fill i	n the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		f current year until for bankruptcy:	■ Wages, commissions, bonuses, tips	\$3,750.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Case number (if known) Document

Debtor 1 Anthony T Manuel

				Debtor 1		Debtor 2	
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	r last calen anuary 1 to	dar year: December 31	1, 2015)	■ Wages, commissions, bonuses, tips	\$48,672.00	☐ Wages, commissions, bonuses, tips	
				☐ Operating a business		☐ Operating a business	
		dar year befo December 31		■ Wages, commissions, bonuses, tips	\$61,308.00	☐ Wages, commissions, bonuses, tips	
				☐ Operating a business		☐ Operating a business	
	and other winnings. I List each s	public benefit If you are filino	payments; g a joint cas e gross inco	her that income is taxable. Exa pensions; rental income; inter se and you have income that y ome from each source separa	rest; dividends; money collect you received together, list it o	ted from lawsuits; royalties; a nly once under Debtor 1.	
				Debtor 1		Debtor 2	
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
	r last calen anuary 1 to	dar year: December 31	1, 2015)	Retirement Income	\$556.00		
				Unemployment	\$7,242.00		
		dar year befo December 31		Retirement Income	\$7,787.00		
				Unemployment	\$0.00		
Pa	rt 3: List	Certain Payı	ments You	ı Made Before You Filed for	Bankruptcy		
6.	Are either No.	Neither Deb	tor 1 nor [2's debts primarily consumer Debtor 2 has primarily consumants personal, family, or household	umer debts. Consumer debts	s are defined in 11 U.S.C. § 1	01(8) as "incurred by an
		During the 9	0 days befo	ore you filed for bankruptcy, di	d you pay any creditor a total	of \$6,425* or more?	
		\square No.	Go to line 7	7.			
			paid that cr not include	each creditor to whom you pai reditor. Do not include paymer payments to an attorney for the	nts for domestic support oblig his bankruptcy case.	ations, such as child support	and alimony. Also, do
	.			nt on 4/01/19 and every 3 year		or after the date of adjustmen	п.
	■ Yes.			or both have primarily consu ore you filed for bankruptcy, di		I of \$600 or more?	
		■ No.	Go to line 7	7.			

attorney for this bankruptcy case.

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	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pay	ment for
7.	Within 1 year before you filed for bankrupto Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony. No	rtners; relatives of any ger control, or owner of 20% of	neral partners; partn or more of their votir	erships of which yong securities; and ar	u are a general ny managing ag	partner; corporations gent, including one for
	☐ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	his payment
8.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cosi No Yes. List all payments to an insider		ments or transfer	any property on a	ccount of a de	bt that benefited an
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	his payment
Par	t 4: Identify Legal Actions, Repossession	s, and Foreclosures	pulu	Still Owe	moldae orear	tor o riamo
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency	1	Status of the	e case
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.		erty repossessed,	foreclosed, garnis	shed, attached	, seized, or levied?
	Creditor Name and Address	Describe the Property		Date		Value of the property
11.	Explain what happened 1. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details.			mounts from your		
	Creditor Name and Address	Describe the action the	e creditor took	Date taken	action was	Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or an □ No □ Yes		erty in the possess			fit of creditors, a

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Case number (if known)

Pa	rt 5: List Certain Gifts and Contributions			
13.	■ No	etcy, did you give any gifts with a total value of more the	nan \$600 per person	?
	Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	□ No	etcy, did you give any gifts or contributions with a tota	l value of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or co	stribution.		
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	al Describe what you contributed	Dates you contributed	Value
	New Life Covenant Church 3400 W. Division Chicago, IL 60651	Monetary Donation: \$80.00 per month.	Monthly	\$80.00
Pa	rt 6: List Certain Losses			
15.	Within 1 year before you filed for bankrup or gambling?	cy or since you filed for bankruptcy, did you lose anyt	hing because of the	ft, fire, other disaster,
	Yes. Fill in the details.			
	Too. This in the dotalle.		Data afairm	Malara of managements
	how the loss occurred	rescribe any insurance coverage for the loss include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Pa	rt 7: List Certain Payments or Transfers			
16.	consulted about seeking bankruptcy or pr	cy, did you or anyone else acting on your behalf pay of eparing a bankruptcy petition? parers, or credit counseling agencies for services required		rty to anyone you
	□ No			
	Yes. Fill in the details.			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	CIN Legal Data Services 4540 Honeywell Ct Dayton, OH 45424	\$60.00 for merged, multi-bureau credit report, credit counseling and debtor education courses.	2016	\$60.00
17.		cy, did you or anyone else acting on your behalf pay o ors or to make payments to your creditors? ou listed on line 16.	or transfer any prope	rty to anyone who
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment

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Debtor 1 Anthony T Manuel

18.	8. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No					
	Yes. Fill in the details.					
	Person Who Received Transfer Address	Description and va property transferre		Describe any property or payments received or del paid in exchange		i
	Person's relationship to you					
19.	Within 10 years before you filed for bankruptobeneficiary? (These are often called asset-protein No.		y property to a sel	f-settled trust or similar de	vice of which you are a	
	Yes. Fill in the details.					
	Name of trust	Description and va	alue of the proper	ty transferred	Date Transfer was	S
					made	
Par	t 8: List of Certain Financial Accounts, Inst	ruments, Safe Deposit	Boxes, and Stora	ge Units		
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred?	, were any financial acc	counts or instrum	ents held in your name, or	for your benefit, closed,	
	Include checking, savings, money market, or houses, pension funds, cooperatives, associ			deposit; shares in banks, o	credit unions, brokerage	
	No					
	Yes. Fill in the details.					
		Last 4 digits of account number	Type of account instrument	or Date account was closed, sold, moved, or transferred	Last balance before closing o transfe	r
21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or o cash, or other valuables?				safe deposit box or other d	epository for securities,	
	NoYes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had according Address (Number, State and ZIP Code)		escribe the contents	Do you still have it?	
22.	Have you stored property in a storage unit or	place other than your	home within 1 yea	ar before you filed for bank	cruptcy?	
	■ No □ Yes. Fill in the details.					
	Name of Storage Equility	Who also has ar h	ad access Do	escribe the contents	Do you still	
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St State and ZIP Code)		scribe the contents	Do you still have it?	
Par	t 9: Identify Property You Hold or Control for	or Someone Else				
23.	Do you hold or control any property that som for someone.	eone else owns? Inclu	de any property y	ou borrowed from, are sto	ring for, or hold in trust	
	■ No □ Yes. Fill in the details.					
		14/1			\.	
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prope (Number, Street, City, St Code)		escribe the property	Value	е
Par	t 10: Give Details About Environmental Infor	mation				
For	the purpose of Part 10, the following definition	ns apply:				

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

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toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or

Debtor 1 **Anthony T Manuel**

regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? п Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and Address (Number, Street, City, State and ZIP Code) know it ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. **Case Title** Court or agency Nature of the case Status of the

Part 11: Give Details About Your Business or Connections to Any Business

27.	Wit	Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?				
		☐ A sole proprietor or self-employed	in a trade, profession, or other activity, eith	ner full-time or part-time		
		☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)				
		☐ A partner in a partnership				
		☐ An officer, director, or managing executive of a corporation				
	☐ An owner of at least 5% of the voting or equity securities of a corporation					
		No. None of the above applies. Go to	Part 12.			
Yes. Check all that apply above and fill in the details below for each business.						
	Ad	siness Name dress mber, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN.		
				Dates business existed		

Address (Number, Street, City,

State and ZIP Code)

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

Case Number

Yes. Fill in the details below.

Name Address (Number, Street, City, State and ZIP Code) **Date Issued**

Name

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 6

case

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are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Anthony T Manuel Signature of Debtor 2 **Anthony T Manuel** Signature of Debtor 1 Date November 1, 2016 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtor and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
 - ■The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
 - (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
 - By agreement of the parties for prepetition and preconfirmation work, including consultation, drafting petition and plan, 341 meeting, negotiation with creditors, court hearings, amendments etc.
 - (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
 - (c) The retainer is a flat fee for the services to be rendered during the Chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;

- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the Chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank.]

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00.
- 2. In addition, the debtor will pay the filing fee required in the case and other expenses of \$310.00.
- 3. Before signing this agreement, the attorney has received, \$\overline{0.00}\$ toward the flat fee, leaving a balance due of \$\overline{4,000.00}\$; and \$\overline{0.00}\$ for expenses, leaving a balance due for the filing fee of \$0.00.
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: November 1, 2016	3
Signed:	
/s/ Anthony T Manuel	/s/ Kevin Rouse ARDC
Anthony T Manuel	Kevin Rouse ARDC #6284394
	Attorney for the Debtor(s)
Debtor(s)	
Do not sign this agreement if the amou	unts are blank.

Local Bankruptcy Form 23c

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B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In r	e Anthony T Manuel		Case No.				
		Debtor(s)	Chapter	13			
	DISCLOSURE OF COMPE	ENSATION OF ATTORN	NEY FOR DE	EBTOR(S)			
1.	cursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered e rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:						
	For legal services, I have agreed to accept		\$	4,000.00			
	Prior to the filing of this statement I have received			0.00			
	n		\$	4,000.00			
2.	\$310.00 of the filing fee has been paid.						
3.	The source of the compensation paid to me was:						
	■ Debtor □ Other (specify):						
4.	The source of compensation to be paid to me is:						
	■ Debtor □ Other (specify):						
5.	■ I have not agreed to share the above-disclosed com	pensation with any other person un	less they are mem	bers and associates of my law firm.			
	☐ I have agreed to share the above-disclosed compen copy of the agreement, together with a list of the na						
6.	In return for the above-disclosed fee, I have agreed to	ase, including:					
	 a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods. 						
7.	By agreement with the debtor(s), the above-disclosed for Representation of the debtors in any discontinuous control of the debtors in any discontinuous control of the debtors.			/ proceeding.			
		CERTIFICATION					
this	I certify that the foregoing is a complete statement of a bankruptcy proceeding.	ny agreement or arrangement for pa	syment to me for re	epresentation of the debtor(s) in			
ı	November 1, 2016	/s/ Kevin Rouse AR	DC				
Date		Kevin Rouse ARDC	#6284394				
		Signature of Attorney Ledford, Wu & Borg	ias IIC				
		105 W. Madison	jes, LLO				
		23rd Floor					
		Chicago, IL 60602 312-853-0200 Fax:	212-072 4602				
		notice@billbusters.					
		Name of law firm					

Case 16-34976 Doc 1

3. Scope of Representation:

2. Services: Client retains Attorney for the following services:

Chapter 13 bankruptcy (debt adjustment)

Filed 11/01/16 Entered 11/01/16 16:26:02

Desc Main

FOR OFFICE USE (13

(312)853-0200 Fax: (312)873-4693 ATTORNEY RETENTION CONTRACT

LEDGOMOPOVU & BAGGE 58. 0165

105 W. Madison, 23rd Floor, Chicago, IL 60602

Client No. Responsible attorney: CARA signed? Y

1. Parties. In this contract, "Client" means the undersigned, both individually and jointly; "Attorney" means Ledford, Wu & Borges, LLC and its staff attorneys. This contract shall supersede any prior contracts and agreements between the parties to the extent of inconsistency. In the event of any inconsistency between this contract and a Court-Approved Retention Agreement, the latter shall prevail.

 (a) Attorney will counsel and represent Client in all aspects of the above matter(s) for the fee specified in Paragraph 4 EXCEPT: (1) adversary proceedings; (2) post-discharge litigation; (3) appeals; (4) other (specify): (b) Attorney may agree, but is not obligated, to represent Client in the above excluded matters for an additional fee, to be agreed upon separately by the parties.
4. Fees: Legal fee: \$ 1/100 PLUS \$310 filing fee (court cost) (an additional Court-Approved Retention Agreement may apply) Expenses: \$ 1/100 PLUS \$310 filing fee (court cost) (an additional Court-Approved Retention Agreement may apply) TOTAL: \$ 1/3/100 PLUS \$310 filing fee (court cost) (an additional Court-Approved Retention Agreement may apply) To be paid by: 1/100 PLUS \$310 filing fee (court cost) (an additional Court-Approved Retention Agreement may apply) To be paid by: 1/100 PLUS \$310 filing fee (court cost) (an additional Court-Approved Retention Agreement may apply) To be paid by: 1/100 PLUS \$310 filing fee (court cost) (an additional Court-Approved Retention Agreement may apply) To be paid by: 1/100 PLUS \$310 filing fee (court cost) (an additional Court-Approved Retention Agreement may apply) To be paid by: 1/100 PLUS \$310 filing fee (court cost) (an additional Court-Approved Retention Agreement may apply) To be paid by: 1/100 PLUS \$310 filing fee (court-Approved Retention Agreement may apply) To be paid by: 1/100 PLUS \$310 filing fee (court-Approved Retention Agreement may apply) To be paid by: 1/100 PLUS \$310 filing fee (court-Approved Retention Agreement and such Agreement so authorizes, or if the case is converted from one chapter to another. Additional court costs may apply for amending a petition, list, schedule or statement post-filing out the research for the Attenuation for the parties have entered into a Court-Approved Retention Agreement and such Agreement so authorizes, or if the case is converted from one chapter to another. Additional court costs may apply for amending a petition, list, schedule or statement post-filing out the research for the Attenuation for the parties are subject to costs may apply for amending a petition, list, schedule or statement post-filing out the research for the parties are subject to court approved Retention Agreement and such Agreement so authorizes are subject to an annual review and potential increase every calculation.
filing or other reasons not due to Attorney's fault. NSF checks will be assessed a \$20 fee. 5. Initial Consultation. Client acknowledges that Attorney has explained the following (please initial): The options of Chapter 7 and Chapter 13 and that Client has made the choice identified in Paragraph 2 The concepts of exemption, discharge and dischargeability, and pre-filing and post-filing procedures The difference among various types of retainer and that Client has made the choice identified in Paragraph 4 A Chapter 13 plan will be submitted to the Court in good faith. The plan payment may have to increase if creditor claims come in higher than scheduled, creditors successfully argue that they are entitled to a higher interest rate, the Trustee successfully argues that the budgeted income is lower than actual income, the Trustee successfully argues that budgeted expenses are unreasonably high or the Court makes a finding that the plan is not the best effort you can make to repay your creditors. TIME IS OF THE ESSENCE. Any delay on Client's part may disqualify Client for the type of relief elected or otherwise adversely affect Client's case. Attorney may not be able to file the case, or take other necessary actions, until all requested documents and/or information, including but not limited to a certificate of credit counseling, are received by Attorney Other (specify):
Client understands that the advice given during the initial consultation is preliminary and based on the information available at the time, and may change as the case is further analyzed, more facts discovered, or Client's circumstances or the law changed.
 6. Client's Duties. Client agrees, during the course of representation, to: (a) provide Attorney with full, accurate and timely information, financial and otherwise; (b) follow Attorney's procedures and cooperate with Attorney in providing requested documents and information; (c) promptly inform Attorney of any change of address, phone number, e-mail address or employment, or activation of military duty; (d) inform Attorney before buying, selling, refinancing or transferring any real property in which Client has any interest, and before incurring any new debt, including but not limited to applying for an auto loan, personal loan, payday loan or title loan, applying for a credit card or line of credit, or using an existing credit card or line of credit; and (e) promptly inform Attorney if Client becomes entitled to an inheritance, an asset as a result of a property settlement agreement with Client's spouse or a divorce decree, life insurance proceeds, or a monetary judgment, award or settlement.
7. Co-counsel. Client understands that more than one attorney may work on this case. Where necessary, Client agrees to employ outside counsel, at Attorney's expense, to work on this case, including: Kathleen W. Vaught, Kelly M. Johnson, David Carter, or Christina Banyon.
8. Termination. Client may discharge Attorney at any time, subject to payment of any fee owed for the services already rendered. Attorney

Attorney Signature:

fee and any payment fo

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penses that have not been incurred towards the attorney's fee, subject to the requirements set forth herein.

may terminate the representation as permitted by the Illinois Rules of Professional Conduct and Local Bankruptcy Rules. Any flat fee for a bankruptcy case is advance payment for future services, becomes Attorney's property upon receipt, and is nonrefundable upon filing of the petition. In the event the representation is terminated by either party before filing and Client has paid Attorney more than \$300, Attorney will provide Client with a detailed itemization of the services rendered in support of any fee charged at the rate set forth in Paragraph 4, and Client will reimbulse Attorney for any expenses, including those that otherwise would be free of charge, and authorizes Attorney to apply the filing

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United States Bankruptcy Court Northern District of Illinois

In re	Anthony T Manuel	Debtor(s)	Case No. Chapter 13	
	VE	RIFICATION OF CREDITOR MA	TRIX	
		Number of C	reditors:	56
	The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of record (our) knowledge.			
Date:	November 1, 2016	/s/ Anthony T Manuel Anthony T Manuel Signature of Debtor		

Aaron's Furniture 4428 W. North Ave. Chicago, IL 60639

Allied Interstate PO Box 103104 Los Angeles, CA 90076

AMCA/Amer Medical Collection Agency 4 Westchester Plaza Suite 110 Elmsford, NY 10523

Arnold Scott Harris, P.C. 111 W. Jackson Blvd Ste 600 Chicago, IL 60604

Attorney Gen Unem Ins Div 33 S. State St. 992 Chicago, IL 60603

Attorney General 100 W. Randolph Chicago, IL 60601

Bank of America PO Box 26078 Greensboro, NC 27420-6012

Capital Accounts 1642 Westgate Cir Sute 20 Brentwood, TN 37027

City of Chicago Dept of Revenue P.O. Box 88292 Chicago, IL 60680-1292

City of Chicago Corporate Counselor 121 N. LaSalle Street Suite 600 Chicago, IL 60602 City of Chicago Dept. of Finance PO Box 6330 Chicago, IL 60680

ComEd 3 Lincoln Center Attn: Bkcy Group-Claims Department Oakbrook Terrace, IL 60181

Direct TV PO Box 78626 Phoenix, AZ 85062

Dr. Romano 3 Erie St Oak Park, IL 60302

Drive Financial PO Box 562088 Dallas, TX 75356

Drive Financial Services 8585 N. Stemmons Frwy, Ste. 800-N Dallas, TX 75247

ERC/Enhanced Recovery Corp 8014 Bayberry Rd Jacksonville, FL 32256

Garfield Family Denistry 11141 S. Kedzie Chicago, IL 60655

GMAC P.O. Box 100049 Duluth, GA 30096-0049

Hinsdale Orthopaedics PO BOX 914 La Grange, IL 60525 Illinois Bell Telephone Company % AT&T Services, Inc.
One AT&T Way, Room 3A104
Bedminster, NJ 07921

Illinois Child Support Enforcement 509 S. 6th St. Springfield, IL 62701-1825

Illinois Department of Empl Securit Benefit Payment Control Division P.O.Box 4385 Chicago, IL 60680

Illinois Department of Employment S P.O. Box 19286 Springfield, IL 62794

Illinois Department of Revenue Bankruptcy Section P.O.Box 64338 Chicago, IL 60664-0338

Internal Revenue Serivce P.O. Box 7346 Philadelphia, PA 19101-7346

JC Christopher & Assoc P.O.Box 519 Sauk Rapids, MN 56379

Laboratory Corp. of America PO Box 8015 Burlington, NC 27216-8015

Melvin Kaplan 14 E. Jackson Blvd. Chicago, IL 60604

Memorial Park District Department of Police 3105 W. Washington Blvd. Bellwood, IL 60104 Minnard M Skiles C/O Simon & McClosky Ltd. 120 W. Madison, Suite 11100 Chicago, IL 60602

National Capital Management, LLC 8245 Tournament Drive Ste. 230 Memphis, TN 38125

NATIONWIDE 3435 N CICERO Chicago, IL 60641

Nationwide P.O. Box 41908 Chicago, IL 60641

Pekay & Bilstein PC 77 W WASHINGTON #400 Chicago, IL 60602

Peoples Gas 200 E. Randolph Dr. Chicago, IL 60601

Portfolio Recovery Attn: Bankruptcy PO Box 41067 Norfolk, VA 23541

Professional Account Management LLC Collection Services Division PO Box 391 Milwaukee, WI 53201

Receivable Management 3348 Ridge Rd. Lansing, IL 60438

Ressurection Health 19 Mollison Way Lewiston, ME 04240 SBC
Bankruptcy Department
PO Box 769
Arlington, TX 76004

Secretary of State Safety & Financial 2701 S. Dirksen Parkway Springfield, IL 62723

Sir Finance 6140 N. Lincoln Ave. Chicago, IL 60659-2318

Southwest Media Consultants 5501 W. 79th Street Suite 400 Burbank, IL 60459

Sprint Attn: Bankruptcy Dept. P.O. Box 8077 London, KY 40742

Sprint Corp.
Attn Bankruptcy Dept
P.O.Box 7949
Overland Park, KS 66207-0949

State Disbursement Unit PO Box 5400 Carol Stream, IL 60197-5400

TCF Bank
P.O box 18160
Saint Paul, MN 55118

Tele-Collection Systems Inc. 4749 Lincoln Mall Drive, Suite 600 Matteson, IL 60443

Tele-Collection Systems Inc. 2 Transam Plaza Drive. Suite 3 Oakbrook Terrace, IL 60181 Tracey Jackson 7124 S. Wentworth Chicago, IL 60626

US Bank PO Box 790084 Saint Louis, MO 63179

US Bank PO Box 5229 Cincinnati, OH 45201

Village of Bellwood 3200 Washington Blvd. Bellwood, IL 60104

westsuburban medical center 3 Erie St Oak Park, IL 60302